



Jim Doyle
Governor

Helene Nelson
Secretary

State of Wisconsin
Department of Health and Family Services

DIVISION OF PUBLIC HEALTH

1 WEST WILSON STREET
P O BOX 2659
MADISON WI 53701-2659

608-266-1251
FAX: 608-267-2832
dhfs.wisconsin.gov

August 10, 2005

TO: Ambulance Service Directors, Medical Directors, EMT Training Centers and various EMS Boards.

FROM: Dan Williams, Chief
Emergency Medical Services Systems Section
Bureau of Local Health Support and EMS

RE: EMS Funding Assistance Program.

A significant change has been made to the EMS funding assistance program. The 1989 Wisconsin Act 102 became law on December 20, 1989. This law provided for supplemental funds to ambulance services owned or operated by a county, city, village, town, Indian tribe, volunteer fire department or a nonprofit corporation organized under chapter 181 of Wis. Stat., and by for profit ambulance services who contract with a county, city, village, or town to provide first-in ambulance response to a particular geographic area (primary service or contract service area). While \$800,000 of the \$2.2 million had been set aside annually to pay for EMT training tuition and testing, the majority of the funding is made available in the form of local assistance.

Governor Doyle, as part of the 2005 - 2007 budget bill, changed the method of how the \$800,000.00 that had previously been set aside for training would be distributed. This change was effective upon signing of the budget by the Governor and is retroactive back to July 1, 2005. Therefore, these provisions are in effect as of July 1, 2005. The simple explanation is that there will no longer be a relationship between the EMS Systems Section and approved training centers for payment of EMT-Basic courses, EMT-Basic Refresher courses or testing. Nor will there be a relationship between the EMS Systems Section and the National Registry of EMTs for payment of the testing fee. A new formula for the distribution of the \$800,000.00 has been established and will distribute the funds directly to eligible providers based on that formula. The formula will be based on a 1/3rd, 1/3rd, 1/3rd basis. The initial 1/3rd would be based on the provider's primary service area population, the second 1/3rd would be based on the number of licensed **Basic EMT's** on the provider's roster and the final 1/3rd will be based on a provider's call volume. This funding is intended to be used for Basic EMT training and Basic EMT refresher training first as a method to continue to pay for that training out of this fund. However, if other training needs are recognized by a provider the funding can now be used for that as well. Ultimately this allows the provider to determine how all of their training will be paid for and this allocation can assist in that process.

The allocation of the \$1.4 million to provider's will remain the same and is based on a payment of \$3,588.00 plus .03 cents per person reported as population served (in the primary service area) on your EMS-FAP application

What does this really mean to individuals and providers? Ultimately it is the responsibility of each individual to maintain an EMS license. As part of that responsibility there are educational requirements. At the Basic level each individual is required to successfully complete an EMT refresher course and have current CPR. In the past the refresher training was paid for through the EMS-FAP. In the future it will be the responsibility of individuals to pay for the refresher themselves. We recognize that many service providers will be providing payment for individuals on their departments. Whatever method of payment that is arrived at is between the individual/provider and the training institution. There no longer will be contractual agreement between the State EMS office and training centers. For initial EMT training, it also will be the responsibility of the individual (or provider) to provide payment to the training center. Also, refresher classes and EMT Basic classes ending after June 30, 2005 will not be paid for using EMS-FAP funds directly from our office. Students will be asked for payment of tuition and materials for these classes

I understand that this is a departure from past practices, and change is difficult. It will require some effort to make new arrangements with training institutions as well. I also feel that these changes will allow for greater local control of how training dollars are spent. This may require provider's to re-evaluate current EMS-FAP spending and place more emphasis on funding training initiatives. However, what is different from the past is that the provider has the total decision in how that allocation will be made.

You will soon be receiving a new application that will outline the areas that have changed and an explanation of how to apply under the new formula format. As part of that application, service providers will need to provide declarations for number of calls per year, service primary population base and number of licensed Basic EMT's on their rosters. We are still sorting out some of the fine details and will have a package of application materials that we anticipate sending out the first part of September.

The statute provides that funds allocated under this program shall "supplement existing budgeted monies of or provided to an ambulance service provider and may not be used to replace, decrease or release for alternative purposes the existing budgeted monies of or provided to the ambulance service provider". In short, EMS-FAP dollars cannot be used to replace existing EMS funding. The statute also mandates that the local assistance funding can be used for the purchase of ambulance vehicles, vehicle equipment and emergency medical service supplies and equipment as well as emergency medical training for ambulance service personnel. Although the funds can be carried over or saved toward a future purchase, funds not expended within one year need to be held in a separate account or line item.

Each year, the ambulance service provider is asked to complete an EMS-FAP application form which asks that they designate their "type of service". Choices include: public agency, volunteer fire department, non-profit corporation and other. State accounting policies mandate that checks

for a public agency be paid to the treasurer of a municipality. (Checks for ambulance service providers that are public agencies are made payable to the designated municipality.) Wisconsin statute 146.55 mandates that allocations to private-for-profit ambulance services be paid to the contracting municipality. If the ambulance service provides proof that is organized as a non-profit corporation under chapter 181 Wis. Stats., the check is made payable to the ambulance service. Municipalities are given specific instructions with each check on what the EMS-FAP funds are to be used for. The municipality can choose to: 1) turn over the check to the ambulance service; 2) run the check through its books and issue a new check to the ambulance service; or 3) keep the money and records of the money and pay the ambulance service as it presents invoices/paid receipts for appropriate expenditures. In any case, the money must be allocated to the ambulance service provider. If the municipality refuses to do this, either note this on the expenditure report or explain the situation in a letter. The municipality will then be asked to complete an expenditure report and this will be turned over to Department of Health and Family Services auditors.

Annual correspondence sent to municipal treasurers explains that funds cannot be used to supplant existing budgets and that the funds are to be used to support and improve the ambulance service. Beginning in fiscal year 2006 you will only receive one check for the entire EMS-FAP allocation. This should allow for easier bookkeeping and make the reporting for the expenditure report less confusing.

The expenditure report detailing expenditures is due at the end of the calendar year in which the final check was received. An expenditure report must be completed for each fiscal year from which you receive funding. The checks are reportable by their fiscal year funding source, not by the date that they arrive! Information on expenditure reporting is sent with the last payment for each fiscal year. Wis. Stat. 146.55 requires that a financial report of expenditures of EMS-FAP money be submitted as a condition of relicensure. Failure to prepare and submit the necessary expenditure reports may also be cause for delaying the processing of future EMS-FAP funding applications for an ambulance service.

It would be our hope in the future that the EMS-FAP will have more dollars allocated to it so that providers will be able to receive more support to provide services to their communities. However until that happens we will make every effort to support services with this fund and with our office support to work towards providing the best possible patient care to the citizens and visitors of Wisconsin.